

Electronic Filing System (EFS) Data

Electronic Patent Application Submission

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EFS ID: 16749
Application ID: 10064592
Title of Invention: SYSTEM TO DETECT USER ENTRY
INTO A DEFINED DANGER ZONE
First Named Inventor: James Metzger
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2002-07-29
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: NONE
Digital Certificate Holder: cn=Mark L. Gleason, ou=Registered Attorneys, ou=Patent and
Trademark Office, ou=Department of Commerce, o=U.S.
Government, c=US
Certificate Message Digest: hbh0+y2m5inb+AjYQgfMqw==
Total Fees Authorized: \$1002.0
Payment Category: DA - Deposit Account
Deposit Account Number: 12508
Deposit Account Name: Mark L. Gleason

TRANSMITTAL FORM

Electronic Version 1.0.3

Stylesheet Version: 1.0

Submission Type: Utility Patent Filing



SYSTEM TO DETECT USER ENTRY INTO A DEFINED DANGER ZONE

First Named Inventor: James I Metzger Jr.

SUBMITTED BY

Name:

Mark L Gleason

Registration Number:

39998

Electronic Signature Mark: Mark L.
Gleason

Date Signed: 20020729

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration

declaration.tif

bibd-transmittal

espd314pds.xml

specification

espd314.xml

patent-assignments

espd314asqn.xml

fee-transmittal

espd314fee.xml

PATENT
10872.0314.NPUS00

DECLARATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or the below named inventors are the original, first and joint inventors (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "SYSTEM TO DETECT USER ENTRY INTO A DEFINED DANGER ZONE," the Specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability of the subject matter claimed in this application, as "materiality" is defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby direct that all correspondence and telephone calls be addressed to Mark L. Gleason, Howrey Simon Arnold & White, LLP, 750 Bering Drive, Houston, Texas, 77057-2198, (952)-474-3701.

I HEREBY DECLARE THAT ALL STATEMENTS MADE OF MY OWN KNOWLEDGE ARE TRUE AND THAT ALL STATEMENTS MADE ON INFORMATION AND BELIEF ARE BELIEVED TO BE TRUE; AND FURTHER THAT THESE STATEMENTS WERE MADE WITH THE KNOWLEDGE THAT WILLFUL FALSE STATEMENTS AND THE LIKE SO MADE ARE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, UNDER SECTION 1001 OF TITLE 18 OF THE UNITED STATES CODE AND THAT SUCH WILLFUL FALSE STATEMENTS MAY JEOPARDIZE THE VALIDITY OF THE APPLICATION OR ANY PATENT ISSUED THEREON.

Inventor's Full Name:	James	I.	Metzger, Jr.
Inventor's Signature:	<i>James I. Metzger, Jr.</i>		
Country of Citizenship:	U.S.A.	Date:	<i>July 26, 2002</i>
Residence Address: (street, number, city, state, and/or country)	<i>219 Barkan Lane Ballwin, MO 63021 USA</i>		
Post Office Address: (if different from above)			

FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 1 002

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 01-2508



Deposit Account Name: Howrey Simon Arnold & White LLP

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

SUBMITTED BY

Authorized Name: Mark L. Gleason

Electronic Signature Mark: Mark L. Gleason

Date Signed: 20020729

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 740

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 23	103	\$ 18	3	\$ 54
Independent Claims: 5	102	\$ 84	2	\$ 168

